## 2018 Current Fiscal Year Report: President's Cancer Panel

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1. Department or Agency 2. Fiscal Year

Department of Health and Human Services 2018

3b. GSA Committee No. 3. Committee or Subcommittee

President's Cancer Panel 1001

4. Is this New During Fiscal 5. Current 6. Expected Renewal 7. Expected Term

Year? Charter Date Date

05/31/2018 05/31/2020 No

8a. Was Terminated During 8b. Specific Termination 8c. Actual Term

FiscalYear? Authority Date

No

9. Agency Recommendation for Next10a. Legislation Req to 10b. Legislation

**FiscalYear** Terminate? Pending?

Continue Not Applicable Not Applicable

**11. Establishment Authority** Statutory (Congress Created)

12. Specific Establishment 13. Effective 14. Commitee 14c.

**Authority** Date Type Presidential?

42 U.S.C. 285a-4 11/20/1985 Continuing Yes

15. Description of Committee National Policy Issue Advisory Board

1 16a. Total Number of Reports

16b. Report

Report Title Date

Promoting Value, Affordability, and Innovation in Cancer Drug 03/01/2018

Treatment

Number of Committee Reports Listed: 1

17a. Open 0 17b. Closed 0 17c. Partially Closed 0 Other Activities 0 17d. Total 0 **Meetings and Dates** 

No Meetings

	Current FY	Next FY
18a(1). Personnel Pmts to Non-Federal Members	\$1,878.00	\$24,648.00
18a(2). Personnel Pmts to Federal Members	\$0.00	\$0.00
18a(3). Personnel Pmts to Federal Staff	\$228,885.00	\$233,234.00
18a(4). Personnel Pmts to Non-Member Consultants	\$0.00	\$0.00
18b(1). Travel and Per Diem to Non-Federal Members	\$357.00	\$11,847.00
18b(2). Travel and Per Diem to Federal Members	\$0.00	\$0.00
18b(3). Travel and Per Diem to Federal Staff	\$0.00	\$4,642.00

 18b(4). Travel and Per Diem to Non-member Consultants
 \$0.00
 \$0.00

 18c. Other(rents, user charges, graphics, printing, mail, etc.)
 \$229,232.00\$523,562.00

 18d. Total
 \$460,352.00\$797,933.00

 19. Federal Staff Support Years (FTE)
 1.50
 1.50

#### 20a. How does the Committee accomplish its purpose?

The committee is composed of three members who provide advice and recommendations to the President of the United States in the areas of policy, health care, research, and information dissemination. The current President's Cancer Panel (PCP, the Panel) member is Dr. Barbara K. Rimer (Chair), who was appointed by President Obama in late 2011 and reappointed by President Obama in 2015. The Panel monitors the development and execution of the activities of the National Cancer Program. Any delays or blockages in rapid execution of the Program are immediately brought to the attention of the President. The Panel conducts meetings throughout the country that serve as a forum for the scientific community and for the public. Based on expert testimony presented and discussions occurring at these meetings, the Panel makes recommendations, some of which have affected the initiation of new NCI programs and the implementation of existing priorities. In 2018, the Panel completed its work on the 2016-2017 workshop series entitled "Ensuring Patients' Access to High-Value Cancer Drugs", with their release of the report, "Promoting Value, Affordability, and Innovation in Cancer Drug Treatment" in March. The report recommends critical actions to ensure affordable access to high-value cancer drugs.

### 20b. How does the Committee balance its membership?

The President's Cancer Panel consists of three persons appointed by the President, who by virtue of their training, experience and background, are exceptionally qualified to appraise the National Cancer Program. It is mandated that at least two of the members of the Panel will be distinguished scientists or physicians.

#### 20c. How frequent and relevant are the Committee Meetings?

Meetings are generally held not less than four times each fiscal year at the call of the Chair. The Panel did not meet in FY18 because of an inability to establish the quorum necessary to hold a meeting.

# 20d. Why can't the advice or information this committee provides be obtained elsewhere?

The President's Cancer Panel was established by law, and the chairman submits to the President, the Secretary, and the Congress an annual evaluation of the National Cancer Program and suggestions for improvements. The Panel also submits such other reports

as the White House requests. The quality, scope, and balance of advice from this Panel cannot be obtained from NIH staff or from other established sources because the membership of the Panel is constituted to meet the specific requirements of its mandated mission to appraise the National Cancer Program.

**20e.** Why is it necessary to close and/or partially closed committee meetings?

#### 21. Remarks

Members: The terms for Dr. Rimer and Mr. Harper changed due to administrative extensions. Mr. Harper's term ended on 3/16/18. As such, their term of service end date is different than what was reported on the FY17 ACR. Meetings: No meetings were held during FY18 due to the inability to establish the quorum necessary to hold a meeting. Costs: The reduction in FY18 operating costs was due to no meetings being held during the fiscal year. The DFO and Committee Decision Maker positions are held by the same individual because of the assignment of responsibilities within the Institute.

#### **Designated Federal Officer**

## ABBY B. SANDLER SPECIAL ASSISTANT TO THE DIRECTOR, RARE TUMORS INITIATIVE

Committee Members	Start	End	Occupation	Member Designation
HARPER, F.	12/19/2013	3 03/16/2018	3 AUTHOR, ACTOR, PHILANTHROPIST	Special Government Employee (SGE) Member
RIMER, BARBARA	03/25/2012	2 02/20/2019	DEAN AND ALUMNI DISTINGUISHED PROFESSOR OF HEALTH BEHAVIOR	Special Government Employee (SGE) Member

**Number of Committee Members Listed: 2** 

### **Narrative Description**

The goal of NIH research is to acquire new knowledge to help prevent, detect, diagnose, and treat disease and disability, from the rarest genetic disorder to the common cold, resulting in better health for everyone. Annual identification and assessment of the issues facing the National Cancer Program contribute to the advancement of this mission and the development of the NIH strategic plan in regards to cancer. Over its approximately 40 year history, the Panel has engaged in active dialogue with all participants in the National Cancer Program [the Program] in an effort to assess the progress and coordination of the Program. The Panel has generally held four or more meetings in each series to gather information and to stimulate discussion among prominent scientists, clinicians, academia, business, industry and the government. Recent topics have included how to increase the uptake of the human papillomavirus (HPV) vaccine; the potential for connected health

strategies and technologies to engage and activate individuals and patients, with the ultimate goal of improving cancer-related outcomes; and ensuring patients' access to high-value cancer drugs. As a link between the President and the public on cancer issues, the Panel provides information that informs cancer policy at the Executive level through its mandate to assess the efficacy of the National Cancer Program. The meetings of the Panel present a unique opportunity to identify and bring together the vast research, health care and manpower resources of this Nation by eliciting public testimony in assessment of the National Cancer Program. The PCP meetings provide the President with the means to identify both the strengths and the weaknesses of the National Cancer Program and the opportunity to seek out needed adjustments. The Panel fills a critical need as the sometimes costly screening, treatment, and technological advances made possible through cancer research must be successfully and equitably applied throughout the country to alleviate suffering and death caused by cancer. During the 2016-2017 workshop series entitled "Ensuring Patients' Access to High-Value Cancer Drugs", the Panel explored a variety of factors that influence drug costs and pricing, such as research and development costs, payment models, reimbursement policies and regulations, organizational treatment guidelines, and other market forces. The Panel's final report on this series, "Promoting Value, Affordability, and Innovation in Cancer Drug Treatment" was released in March 2018.

## What are the most significant program outcomes associated with this committee?

	Checked if Applies
Improvements to health or safety	✓
Trust in government	✓
Major policy changes	✓
Advance in scientific research	✓
Effective grant making	
Improved service delivery	✓
Increased customer satisfaction	✓
Implementation of laws or regulatory requirements	✓
Other	

#### **Outcome Comments**

The PCP, because it is charged under the Cancer Act to assess the program, has indicated that it has responsibilities in all areas of the cancer program which includes the above.

What are the cost savings associated with this committee?

None	
Unable to Determine	✓
Under \$100,000	
\$100,000 - \$500,000	
\$500,001 - \$1,000,000	
\$1,000,001 - \$5,000,000	
\$5,000,001 - \$10,000,000	
Over \$10,000,000	
Cost Savings Other	

## **Cost Savings Comments**

NIH supported basic and clinical research accomplishments often take many years to unfold into new diagnostic tests and new ways to treat and prevent diseases.

What is the approximate <u>Number</u> of recommendations produced by this committee for the life of the committee?

192

#### **Number of Recommendations Comments**

There were 6 recommendations made in FY18 through a report that was finalized and released in FY18.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Fully</u> implemented by the agency?

## % of Recommendations Fully Implemented Comments

Due to the large breadth and complexity of the recommendations made by this committee, NCI staff is unable to determine which recommendations have been fully or partially implemented solely in response to this committee's activities.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Partially</u> implemented by the agency?

## % of Recommendations Partially Implemented Comments

Due to the large breadth and complexity of the recommendations made by this committee, NCI staff is unable to determine which recommendations have been fully or partially implemented solely in response to this committee's activities.

	ee with feedback regarding actions taken to
implement recommendations or advice Yes No ✓ Not Applicable	e otterea?
Tes No Not Applicable	
Agency Feedback Comments	
N/A	
What other actions has the agency tak	en as a result of the committee's advice or
recommendation?	
	Checked if Applies
Reorganized Priorities	✓
Reallocated resources	
Issued new regulation	
Proposed legislation	
Approved grants or other payments	
Other	
Action Comments	
N/A	
Is the Committee engaged in the revie	w of applications for grants?
No	
<b>Grant Review Comments</b>	
N/A	
How is access provided to the information	ation for the Committee's documentation?
	Checked if Applies
Contact DFO	✓
Online Agency Web Site	✓
Online Committee Web Site	✓
Online GSA FACA Web Site	✓
Publications	<b>✓</b>
Other	✓

## **Access Comments**

Information on the PCP can be found at the President's Cancer Panel website at

and in person briefings.			

https://prescancerpanel.cancer.gov. Findings are also communicated through mailings